Male Versus Female Intimate Partner Violence: Putting Controversial Findings Into Context

The article "Partner Violence and Mental Health Outcomes in a New Zealand Birth Cohort" is an empirically sound study that raises interesting questions for the field of domestic violence research. As noted by its authors, the study's strengths include the large representative sample, the prospective nature of the research, and the consideration of a variety of covariates of domestic violence. Within this study, the authors have addressed a series of controversial issues, and their findings now become one new piece of the puzzle regarding how to conceptualize male and female intimate partner violence. When attempting to fit this new piece into the puzzle, it is important to keep in mind the "larger picture" (which we might wish was neatly presented on the side of the puzzle box!) and the evolution of work in this area. How do the current findings fit into the existing empirical findings on partner violence?

Rates of Male and Female Intimate Partner Violence

First, as have many others, the authors find that among a community sample of young people, rates of male and female violence are equivalent (see review by Archer, 2000). Indeed, if anything, in such samples, women tend to be slightly more likely to engage in physical aggression than men (Archer). As the authors

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note, these findings are consistent with a growing body of literature studying young samples and community samples, but they are inconsistent with research examining severe levels of violence (e.g., studies of criminal behavior, stalking after separation or divorce, sexual aggression, emergency room visits, murder), which usually suggest that male violence is more problematic than female violence. Unfortunately, studies such as the current one often do not include enough cases of severe violence to permit examination of gender differences in severe violence. Thus, differences in findings across studies have been attributed to the samples studied, the measures used (e.g., the Conflict Tactics Scale does not adequately assess the context or consequences of violence), and the behaviors examined (e.g., studies that include measures of stalking and sexual aggression show higher rates of male violence). Given such discrepancies in findings, as the authors note, there is clearly a need for future research to "provide an in-depth analysis of the way in which the gender ratio in the perpetration of domestic violence varies with the severity of violence." Until such work is accomplished, the field will continue to be divided into two camps: (a) those studying community and young samples and primarily minor violence, who argue that women and men are equally violent and (b) those studying samples experiencing severe violence, who argue that male violence is more problematic than female violence.

At this time, we do not understand the relationship between these two types of violence. Certainly, some spouses who initially perpetrate minor violence will escalate their aggression

over time, becoming engaged in more severe violence. But longitudinal studies suggest that such escalation is not inevitable and that some couples maintain only minor levels of violence or even desist from violence over time. We do not fully understand which couples progress from minor to severe violence and whether couples change from common couple violence to intimate terrorism (i.e., terms coined by Johnson, 1995; Johnson & Ferraro, 2000) or whether these types of violence are distinct and independent phenomena. Based on our own work on batterer typologies, we have suggested that differences in the course of violence may best be predicted by individual, particularly male, characteristics, such that some subtypes of men (e.g., generally violent and antisocial men or men experiencing severe psychological distress and evidencing characteristics of borderline personality disorder) will engage in high levels of partner violence, whereas other subtypes of men (e.g., men who do not come from risky backgrounds or evidence much psychopathology) will not inevitably escalate their violence (Holtzworth-Munroe & Meehan, 2005). Whether such characteristics may also be useful ways to characterize women who engage in partner violence has yet to be determined. Similarly, the potential dyadic interplay between varying subtypes of male and female perpetrators has yet to be examined. In summary, at this time, we lack enough data to fully understand the differing ratio of male to female violence across differing samples and at differing levels of violence severity.

Consequences of Male and Female Intimate Partner Violence

Second, even when men and women are found to engage in violence at similar rates, the majority of previous research supports the notion that male violence has more negative consequences for its victims than does female violence, with women experiencing more injury and other negative psychological consequences (e.g., see review by Archer, 2000). Thus, the authors are to be commended for attempting to examine this issue in several ways. Although the majority of studies suggest that male violence is more likely to lead to injury than female violence, the current study's lack of gender differences in injury rates is consistent with a very small number of studies (often of similar samples). Unfortunately, it is difficult to examine injury in samples such as the one in this study, given low levels of injury rates.

In contrast, in a finding that the authors do not adequately consider, there were significant gender differences in fear of the partner, with women being more afraid of their violent partners than men. This gender difference is consistently found across studies (Holtzworth-Munroe, Smutzler, & Bates, 1997). In other studies, another set of related findings suggest gender differences in the impact of violence: Researchers have found that a portion of men experiencing female partner violence laugh at it or think it is funny, suggesting that it does not intimidate them, whereas women do not find male violence to be humorous (Holtzworth-Munroe, 2005). At this time, we do not understand such gender differences. On the one hand, one could argue that society has trained women (e.g., through socialization, media, public service announcements) to fear male violence, whereas men's socialization (e.g., toughness, machoism) would lead them to believe that they should not be intimidated by female aggression. If correct, then men and women experiencing partner violence might actually have equal bases for fear, but men have learned to ignore or not report their true levels of fear, whereas women may be oversensitized to, or likely to overreport, fear. On the other hand, it is likely that women legitimately have more reason than men to fear partner violence, given gender differences in physical size and strength, the fact that the majority of studies demonstrate that women are more likely to be physically injured by partner violence than are men, and our society's gender differences in power and control of resources. In summary, by including measures of injury and fear, recent researchers have made progress in understanding potential differences in the impact of male and female partner violence, but future researchers will need to develop more sophisticated measures to fully understand the differing experiences of partner violence for men and women. As discussed below, examination of other mental health outcomes (e.g., posttraumatic stress disorder or PTSD) might also be useful when examining this issue.

Initiation of Male Versus Female Intimate Partner Violence

Third, in another attempt to understand the context of partner violence among their sample, the

authors should be commended for asking about initiation of violence. As is true of other recent studies that purport to examine this issue, however, the question asked was unclear: Were study participants asked who initiated physical aggression in the relationship (i.e., who first used physical aggression and thus introduced violence into the relationship) or who initiated physical violence in a particular incident of violence and, if so, which incident? The data from this study suggest that women were more likely to initiate violence than men. With the exception of women's self-reported perpetration, however, in all other reports in this study (e.g., men's reports of perpetration and victimization and women's report of victimization), the majority of individuals did not report that they had initiated violence but rather blamed their partner. This is consistent with other studies of initiation. Indeed, after reviewing several studies comparing female and male violence, I recently concluded, regarding the question of initiation of violence, that "the answer seems to be in the eye of the beholder, with each gender tending to claim that their partner 'started it'" (Holtzworth-Munroe, 2005). Of course, such assessments may easily be influenced by self-reporting biases, which should be carefully considered when studying either partner's report of who initiated the violence.

Mental Health Outcomes Related to Male and Female Intimate Partner Violence

Fourth, to further compare the impact of male and female partner violence, the authors examined the relationship of violence to three mental health outcomes: depression, anxiety disorders, and suicidal ideation. Given the availability of prospective data in their study, the authors were able to conduct a relatively sophisticated examination of this issue by covarying out preexisting psychological problems and potentially confounding third variables (e.g., impoverished family background) that could account for experiencing increased levels of both domestic violence and mental health problems. After doing so, they found that depression and suicidal ideation, but not anxiety, were related to increasing levels of partner violence victimization for both men and women. Although little previous research has examined the mental health outcomes of partner violence among men, the current findings stand in contrast to the scarce existing data, which generally show partner violence to have more negative psychological consequences for women than for men (e.g., see review by Holtzworth-Munroe, Smutzler, & Sandin, 1997). There are several points to examine when considering these findings in the current study.

PTSD was not examined as a mental health outcome, even though PTSD (followed by depression) is the psychological disorder most commonly found among battered women (see meta-analysis by Golding, 1999). Thus, the most prevalent mental health outcome among battered women was not examined in the present study, and the possibility of gender differences in PTSD awaits further study. The absence of the examination of PTSD symptoms is particularly problematic as it may prove to be the disorder best able to capture the differing impact of partner violence on women versus men. Specifically, the diagnosis of PTSD requires the presence of fear in the face of a serious threat of injury or death. As noted above, studies (including the current one) consistently demonstrate that women report more fear of their violent partners than do men. In contrast, previous research demonstrating that some men find the female violence to be humorous does not suggest that such men will develop PTSD symptoms as a consequence of such violence. Thus, one can speculate that among individuals experiencing partner violence, particularly among those experiencing severe partner violence, women may be more likely than men to develop symptoms of PTSD, demonstrating the differing impacts of partner violence on women and men.

In addition, in a meta-analysis of studies examining intimate partner violence as a risk factor for mental disorders among women, Golding (1999) cited criteria (developed by Hill, 1965) to use when considering whether an environmental event (such as partner violence) may be causally related to health problems (e.g., mental health problems). Among women, enough evidence is available to lend initial support to several of these criteria. In contrast, given the current paucity of data on the effects of female partner violence, corresponding data for men do not yet exist.

One criterion discussed by Golding (1999) was *consistency*, or the simple idea that if an association between violence and psychological problems is repeatedly found across multiple

studies, we can be more confident in this association. There now is a consistency in findings, across multiple studies, regarding the relationship between male to female partner violence and psychological problems among women (see Golding; Holtzworth-Munroe, Smutzler, & Sandin, 1997), but given a lack of research, a similar consistency has yet to be established among samples of men with violent female partners. Regarding a second criterion, among samples of women experiencing male partner violence, several studies have demonstrated a doseresponse relationship between the level of violence experienced and the probability of psychological problems. In other words, women experiencing more severe partner violence are more likely to experience symptoms than women experiencing less severe partner violence (e.g., Golding; Holtzworth-Munroe, Smutzler, & Sandin). To my knowledge, with the exception of the present study, this issue has received little attention among studies of men. Third, the criterion of temporality, demonstrating a chronological relationship between violence psychological symptoms, should be considered. The present authors address this in one way, by covarying out preexisting mental health problems when examining the concurrent relationship between partner violence and mental health. In research on battered women, however, this issue has been examined from another perspective: starting at the point of violence and moving forward. Thus, among samples of women, it is found that levels of psychological symptomatology decrease as women leave violent relationships and the longer their lives remain violence free, suggesting that the violence caused the psychological problems and such problems may resolve once the violence is no longer occurring (e.g., Golding; Holtzworth-Munroe, Smutzler, & Sandin). Such studies have yet to be conducted among men, although the authors of the current research may have the chance to do so in future examinations of their sample. Only through future research, examining such issues among men, will we eventually be able to reconcile a seeming contradiction in current theories of partner violence: The fact that psychological disorders among men are often discussed as the causes of male intimate partner violence (e.g., our own batterer typology model assumes that male psychopathology causes male aggression; Holtzworth-Munroe & Meehan, 2005), whereas psychological disorders among

women in violent relationships are usually understood to be consequences of victimization. In summary, longitudinal studies, examining mental health before and after both the onset and desistance of violence, among both men and women, are needed to fully address this issue. Similarly, including PTSD as a psychological disorder of interest will be important in such future research.

Violent Individuals or Violent Dyads

Fifth, although acknowledging that their findings might only apply to one type of violence (i.e., common couple violence), the authors suggest that such violence "may be better conceptualized as an issue relating to violent partnerships rather than violent individuals." This conclusion is consistent with a growing consensus in the field that there are differing types of violence that may have differing causes. Specifically, lower levels of violence (e.g., minor violence, often engaged in by both partners, and usually studied in community and young samples) are beginning to be viewed as having dyadic causes, whereas more severe violence (e.g., severe and/or frequent violence, often studied in clinical or criminal samples, and often found to be more male perpetrated) is increasingly viewed as being caused by individual characteristics of the violent male partner (see Holtzworth-Munroe & Meehan, 2005, for a lengthier discussion of this notion). Ultimately, however, this question can only be addressed by observing individuals as they enter and exit multiple relationships, to see whether an individual (e.g., a severely violent batterer subtype) "carries" his violence with him into new relationships, whereas partners in less violent relationships move on to enter new, nonviolent relationships. Given the low levels of violence found among the current sample, the authors may or may not have a chance to examine this issue in future studies of their sample.

Other Variables Still Requiring Investigation

Sixth, the present study did not include measures of all of the variables that one would ideally consider when comparing male and female intimate partner violence. Large longitudinal studies, such as the current one, often have a very broad focus (e.g., multiple predictor variables and multiple outcomes) and thus cannot

include measures of every factor that might be of interest. For example, the present study did not examine partners' motivation for violence. When motivation is examined, it is often found that men are more likely (or more willing?) than women to self-report using violence against their partner for instrumental purposes, thus suggesting that male violence may be more controlling than female violence (Holtzworth-Munroe, 2005). Of course, self-reports of motivation may be biased.

Going beyond self-reported motivation, it should be noted that the current study did not include measures of the functional impact of aggression: How does violence on the part of one partner predict the other partner's behavior, either immediately (e.g., in observed marital interactions) or over time? Some preliminary work has suggested that, relative to female violence, male violence may be less predictable and thus more frightening, resulting in its being more controlling of the partner (Jacobson et al., 1994).

As already noted, no one study can include all potentially relevant variables. This is particularly the case in the type of research presented here, as such studies were not originally designed to study partner violence. The field is increasingly seeing such work, in which samples of children, originally recruited to study other outcomes (e.g., antisociality, mental health), have been longitudinally followed into adulthood, at which time (given a recent increase in interest in domestic violence), the study participants are asked about intimate partner violence. The addition of measures of partner violence to such studies, even if relatively "late" in development (given the high frequency of dating violence in adolescent samples), is to be commended. Because such studies were not originally designed to predict partner violence, these studies usually do not include predictor variables that are discussed in current theories of partner violence (e.g., based on our batterer subtype theories of partner violence, one might include measures of jealousy and borderline personality disorder as predictors of violence; Holtzworth-Munroe & Meehan, 2005).

Thus, it is important to note that the present study did not directly compare the correlates and predictors of male versus female violence. Ultimately, we need to understand whether similar theories adequately explain both male and female intimate partner violence or whether they are different phenomena, requiring differing models (Holtzworth-Munroe, 2005). Such questions have important implications for prevention and treatment efforts.

Conducting Science and Presenting Empirical Data in a Politically Charged Field

Finally, there is the important ethical question of how scientists can address a controversial issue such as female aggression in a manner that does no harm. This is a particularly tricky issue in the current early phases of such research, when findings are sparse enough that definitive conclusions cannot be drawn across multiple studies. Whether desirable or not, research on the topic of intimate partner violence is of interest to the public, workers in the field (e.g., clinicians, battered women's advocates, police, and judges), and policymakers (e.g., legislators, funding agencies, domestic violence coalitions). As such, it is important to note that various parties have misrepresented and distorted scientific findings to meet their own political agendas. For example, as reviewed by Saunders (2002), certain men's groups have pulled findings such as the present ones out of context, using a lack of demonstrated difference between male and female violence to argue for such actions as ending funding for domestic violence programs and shelters for battered women (on the basis that they discriminate against men)!

Although consumers ultimately can distort research findings for their own purposes, it behooves scientists in this area to keep such potential misuses of data in mind during all phases of research: when considering what questions to study, how to study them, and how to interpret study findings. At this time, our understanding of male intimate partner violence is quite advanced compared to our understanding of female aggression in relationships. As such, caution is required when presenting data on female aggression. Such work can be misrepresented and misused in ways that are scientifically unjustifiable. Researchers should not unintentionally contribute to such misadventures by failing to put controversial findings into context. In this spirit, it is fortunate that the editor of JMF has invited responses to this interesting and potentially controversial article.

REFERENCES

- Archer, J. (2000). Sex differences in aggression between heterosexual partners: A meta-analytic review. *Psychological Bulletin*, *126*, 651–680.
- Golding, J. M. (1999). Intimate partner violence as a risk factor for mental disorders: A meta-analysis. *Journal of Family Violence*, *14*, 99–132.
- Hill, A. B. (1965). The environment and disease: Association or causation? *Proceedings of the Royal Society of Medicine*, 58, 295–300.
- Holtzworth-Munroe, A. (2005). Female perpetration of physical aggression against an intimate partner: A controversial new topic of study. *Violence and Victims*, 20, 253–261.
- Holtzworth-Munroe, A., & Meehan, J. C. (2005). Partner violence and men: A focus on the male perpetrator. In W. M. Pinsof & J. Lebow (Eds.), *Family psychology: The art of the science* (pp. 167–190). Oxford/New York: Oxford University Press.
- Holtzworth-Munroe, A., Smutzler, N., & Bates, L. (1997). A brief review of the research on husband violence. Part III: Sociodemographic factors, relationship factors, and differing consequences of

- husband and wife violence. Aggression and Violent Behavior, 2, 285–307.
- Holtzworth-Munroe, A., Smutzler, N., & Sandin, E. (1997). A brief review of the research on husband violence. Part II: The psychological effects of husband violence on battered women and their children. Aggression and Violent Behavior, 2, 179– 213.
- Jacobson, N. S., Gottman, J. M., Waltz, J., Rushe, R.,
 Babcock, J., & Holtzworth-Munroe, A. (1994).
 Affect, verbal content, and psychophysiology in the arguments of couples with a violent husband.
 Journal of Consulting and Clinical Psychology, 62, 982–988.
- Johnson, M. P. (1995). Patriarchal terrorism and common couple violence: Two forms of violence against women. *Journal of Marriage and the Family*, 57, 283–294.
- Johnson, M. P., & Ferraro, K. J. (2000). Research on domestic violence in the 1990s: Making distinctions. *Journal of Marriage and the Family*, 62, 948–963.
- Saunders, D. G. (2002). Are physical assaults by wives and girlfriends a major social problem? *Violence Against Women*, 8, 1424–1448.